

Outstanding New Adviser Award Overview

Award

The Outstanding New Adviser Award recognizes advisers with 1 – 5 years of experience who best exemplifies the goals and ideals of the Colorado FCCLA organization.

Who may submit this application: Adviser, advisory board member, students, parents, administrator, State Executive Council Member, or any other person knowledgeable about adviser’s work.

Evaluative Criteria

Evaluation will be based on 2 components (100 pts.): (to include completeness, support materials, etc.)

- | | |
|---|-------------------------------------|
| 1. List and Description of nominee’s work | 60 Points (total from below) |
| a. Students | 30 Points |
| b. School Personnel | 10 Points |
| c. Community | 10 Points |
| d. Family and Consumer Sciences Professionals | 10 Points |
| 2. One (1) letters of support | 40 Points |

Application Material

1. Complete the Candidate Information
2. List and describe how the nominee has worked with the following groups (max four pages):
 - a. FCCLA Member or FACS Student
 - b. School Personnel
 - c. Community
 - d. Family and Consumer Sciences Professionals
3. Submit one (1) letter of support from the following categories (one from each category):

Member	School	Community
<ul style="list-style-type: none"> • Current • Alumni • FACS Student 	<ul style="list-style-type: none"> • CTE Director • Faculty Member • Parent • Principal/ Superintendent 	<ul style="list-style-type: none"> • Advisory Committee • Community Leader • School Board Member

Submission Process

Email Application Material to cofccla.stateadviser@gmail.com by **March 1, 2017**. Applications file name should be titled “ApplicantsLastName_NewAdviser”. Files formats may only be .docs, .doc, .pdf, or .rtf.

Recognition

The award will be presented during the 2017 State Leadership Conference.



Outstanding New Adviser Award Application

Candidate Information

Nominee: _____

Title: _____ School: _____

Chapter Name: _____ FCCLA District: _____

Years Teaching: _____ Years as Adviser: _____ Affiliation Type: _____

Number Members in Chapter: _____ Grade Levels Taught: _____

Nominating Person: _____

Cell Phone: _____ Email: _____